

10/509833

FA	Y	TR	AN	CZ	ATC	CT		N
	$\Delta$	$\mathbf{I}$	$\alpha$	OI		OI.	V.	L N

DATE:

February 16, 2005

PTO IDENTIFIER:

**Application Number** 

10/509633

Patent Number

Inventor: Jean-Claude Arnould

**MESSAGE TO:** 

US Patent and Trademark Office

**FAX NUMBER:** 

(703) 872-9306

FROM:

**ROPES & GRAY LLP** 

David P. Halstead, Ph.D.

PHONE:

(617) 951-7615

Attorney Dkt. #:

ASZD-P01-467

PAGES (including Cover Sheet):

CONTENTS:

Revocation of Power of Attorney or Authorization of Agent (1 page) Statement By Assignee to Establish Ownership (37 CFR 3.73(b)) (1 page) Copy of Assignment Originally Submitted on 09/29/04 (1 page)

This Facsimile Cover Sheet (1 page) Certificate of Transmission (1 page)

If your receipt of this transmission is in error, please notify this firm immediately by collect call to sender at (617) 951-7615 and send the original transmission to us by return mail at the address below.

This transmission is intended for the sole use of the individual and entity to whom it is addressed, and may contain information that is privileged, confidential and exempt from disclosure under applicable law. You are hereby notified that any dissemination, distribution or duplication of this transmission by someone other than the intended addressee or its designated agent is strictly prohibited.

## **ROPES & GRAY LLP**

One International Place, Boston, Massachusetts 02110-2624 Telephone: (617) 951-7000 Facsimile: (617) 951-7050

PTO/SB/97 (09-04)

Approved for use through 07/31/2009. Om3 0611-0031 U. S. Petent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Pacennor't Robuction Act of 1995, no persons are required in respond to a collection of information unless it displays a valid QMB control number

Application No. (if known): 10/509633

Attorney Docket No.: ASZD-P01-467

## Certificate of Transmission under 37 CFR 1.8

I hereby certify that this correspondence is	being facsimile transmitted to the United
States Patent and Trademark Office.	

QN	February 16, 2005						
	Date						

many Jane	J. Palm	
OO Signa	ature	
Mary Jane	DiPalma	
Typed or printed name of	person signing Certificate	
Registration Number If applicable Telephone Number		

Note: Each paper must have its own certificate of transmission, or this certificate must identify each submitted paper.

Revocation of Power of Attorney or Authorization of Agent (1 page) Statement By Assignee to Establish Ownership (37 CFR 3.73(b)) (1 page) Copy of Assignment Originally Submitted on 09/29/04 (1 page) Facsimile Cover Sheet (1 page)

This Certificate of Transmission (1 page)